REQUEST FOR PAYMENT SAMPLE FORM										SIGNMEN					COMMONWEALTH OF MASSACHUSETTS CPCS				
ASSIGNMENT DATE CLIENT NAME 2 3								DOCKET NUMBERS 4				ATTORNEY NAME AND VENDOR CODE 5							
COURT CODE 6 BILLS MUST BE RECI CLOSE OF A CASE; E THE FISCAL YEAR MI (SEE MANUAL FOR IN								ILLS ON <u>AL</u> JST BE REC	<u>L</u> CASES OF EIVED BY A	PEN AT THE I	N AT THE END OF CHECK ONE:		K ONE:	CRIMINAL NON-CRIMINAL					
PART '			Irs. to neare	•		_	ervices re	endered In	this case.	(SEE MAN	IUAL FOR	INSTRUCT	TONS)						
		15 MIr	A-IN COURT A HOURS		50, 610.				B - OUT O	F COURT HO	COURT HOURS		9C				В		
	9A		11	9B TOTAL	2 Record	3 Conf	4 Draft	5 Draft	6	7 Court	8	9 Draft Pet	10	1 1 Draft	12	1 3	TOTAL		
	DATE		Hearing/	1		w/Couns	_	Арр	Prep-	Waiting	Client	Rehrg/	Legal	CPCS Appr		Other	2-13		
MO	DAY	YR	Argument		Rev Tr	Mentor	Memo	Brief	Arg/Hrg	Time	Contact	FAR	Research	Fed	TRAVEL				
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PART			DRNEY CE	RTIFICA				TOTALB	HOURS	DIGIT	=	TOTAL		10	TAL O	1017	L DILL		
			r the pair																
	have been appointed to the above case, that I have provided the services and incurred the costs on the dates and											Send copy which contains your original signature to:							
for	for the times listed, and that I have not received nor will											Committee for Public Counsel Services							
accept any other payment for these services. I further certify that I have provided representation consistent with																			
CPCS Performance Guidelines and Standards, and that all charges for legal services on this bill are based upon my											44 Bromfield St.								
con	itemp	oran	eous tim	e recor	ds mair	ntainte	d in ac	Boston, MA 02108											
VVIII	ıı ıne	CPU	S Assigne					nations	٠.										
1	Fisc	al Yea	ar End	4 Rep	resentat	lon cond	luded												
2	Quar	terly b	oilling (SE	MANUA	L FOR G	UIDELIN	ES)												
13																			
ATTORNEY SIGNATURE SUBMISSION DATE										CHECK HERE IF CONTINUATION RFP'S ATTACHED									